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Cases and deaths from yellow fever.

Month.	Yellow fever in the port.		Deaths from yellow fever on shore.
	Cases.	Deaths.	
1898.			
January.....	3	0	17
February.....	6	4	95
March.....	17	6	258
April.....	8	6	300
May.....	9	5	174
June.....	7	3	87
July.....	3	2	66

Beside yellow fever there occurred in the shipping during the months from March 1 to the end of July, 2 cases of *accessio pernicioso*, of which 1 was fatal, 4 cases of smallpox, which were cured, and 1 fatal case of a malarial infection.

I must not omit to state that recently two Norwegian ships, named *Odd* and *Labella*, both proceeding from Rangoon, arrived at this port in a deplorable condition. During the voyage beriberi appeared on board of both ships and caused some deaths. The authorities took charge of these ships.

Since last report the following-named ships have been inspected and received bills of health from this office: September 2, bark *Maria Emilia*, Portuguese, for Brunswick. September 3, steamship *Cycla*, British, for St. Lucia; steamship *Severn*, British, for Baltimore; barkentine *Arthur C. Wade*, American, for St. Lucia. September 6, steamship *Hevelius*, Belgian, for New York; steamship *Lucina*, British, for Philadelphia; schooner *Ferreira*, Portuguese, for New Orleans.

Respectfully, yours,

W. HAVELBURG, M. D.,
Sanitary Inspector, U. S. M. H. S.

Leprosy in Brazil.

RIO DE JANEIRO, *September 15, 1898.*

SIR: I have the honor to transmit to you the official report for the week ended September 2: There were 258 deaths from all causes, an increase of 26 as compared with the foregoing week; 7 deaths from *accessio pernicioso*, the same as before; 6 deaths from yellow fever, a decrease of 1; 2 deaths from smallpox and 1 death from measles, none before; 2 deaths from beriberi, an increase of 1, and 65 deaths from tuberculosis, an increase of 15.

* * * * *

Leprosy, as a chronic infectious disease, deserves great consideration in Brazil. Probably that disease was imported to Brazil between 1644-1697 by the Portuguese. In proof of this supposition I will point to the communications of the physician and scientific traveler, Piso, who accompanied the celebrated explorer of Brazil, Count John Maurice, of Nassau, during the years 1637-1644. That scientist writes in his work, published at Leyden, 1658: "*Lepra autem et scabies incognitae sunt,*" and in another place: "*Inter vitia cutanea nondum ulli medicorum, ex quo detecta fuit haec America pars, scabiem, lepram, elephantiasim observasse contigit, sicut in Aegypto aliisque fervidioribus regionibus grassare testatum est ab autoribus.*"

On the other hand, in the year of 1697 there were already so many lepers in Brazil that the governor, Arthur de Sá Menezes, asked the

King, D. Pedro II, of Portugal, for a special and separate place in which the lepers might be treated.

In the interval between 1644 and 1697 nothing noteworthy occurred in Brazil except the increasing immigration of the Portuguese, in whose country and in whose colonies leprosy had spread very much at that time, as is well known. Also at the present time there are still a great many lepers in the Portuguese possessions, and chiefly at Madeira.

No legal regulations intended to restrict the prevalence of leprosy have been issued; therefore, in Brazil during the last two centuries leprosy has largely spread. The scientific traveler, Tschudi, writing, about 1850, states that on the frontier, between the provinces of Minas and Sao Paulo, there are localities in which almost every family is "morfetico;" and in his report of the year 1840 to the provincial chamber of Sao Paulo, the president states:

"It is pitiable to see the number of wretched people infected with leprosy ranged along the road from Rio de Janeiro to Sao Paulo. In the vicinity of every village there is a hut which serves as a refuge for these exiles from society."

The situation has been much changed by natural causes and by the efforts made in their own behalf by the people; but leprosy still persists in a greater or less degree in all the States of Brazil. For the most part the lepers are poor people, or they gradually become so, and then they wander helplessly in the streets as beggars, or otherwise they are a burden to their families and neighbors; but also in the better and best situated circles of society there are lepers. An estimate of 3,000 lepers in Brazil at the present time can not be considered exaggerated.

For these unfortunates there are some special sanatoriums, so-called "leproseries," at Pernambuco, Sao Paulo, and principally at Rio de Janeiro. The leprosy hospital at the last-named place was originally founded as a monastery of the Jesuits, but it has been renovated and altered so often that it may be considered as almost a new establishment. The administration of the hospital is in charge of a religious association of the Irmandade do Santissimo Sacramento de Candelaria.

There are no regulations imposing on lepers the obligation to enter the hospital and there is also no domiciliary inspection of the lepers by the authorities, and no obligatory notification by physicians. No special notice has been taken of the resolutions of the International Leprosy Conference of last year, at Berlin, for converting theories into practical measures.

As for the rest, it is probably very difficult to subject the lepers to legal regulations, requiring isolation, inspection, obligatory treatment in a hospital, because such regulations would hardly touch family circles.

Therefore, the lepers are for the most part helpless people, who require treatment in hospital. The domestic arrangements of the leprosy hospital of this place are the most favorable that can be imagined, and of the same nature, so far as human power extends, are also the general bodily and medical treatment. Consequently the hospital is not only an asylum for poor lepers, but also, comparatively speaking, a safeguard against the development of that disease among the sound population. It would be desirable that this point of view should receive more consideration, and that admission into the hospital, the rooms of which are large enough for receiving a greater number of sick persons, should be sought by more of these unfortunates. But naturally, admission into the hospital demands the surrender of a great

deal of personal liberty, and only, when very ill, are people disposed to subject themselves to this.

According to the annual report of the administration, published in the month of August, there are at present in the leprosy hospital 61 persons, of whom 51 are Brazilians. Of these patients, there are 41 males and 20 females; 51 are adults, 10 are children.

During the past year there died 19 lepers. Death was caused in eight instances by cachexia leprosa, in one instance by the consequences of lepra anæsthesica, in four instances by tuberculosis, and in six instances by different diseases.

During the last year there were received at the hospital 22 patients, and 12 were discharged. The discharge, says the medical director, Professor Dr. Gabizo, did not result from any improvement in the conditions of the patients justifying their discharge, but from the fact that their continuance in the hospital is not obligatory, and it is difficult for physicians to struggle against the impatience and desperation of those unfortunates.

Since last report the following-named ships have been inspected and received bills of health of this office: September 8, steamship *Leonora*, Dutch, for Port Arthur; steamship *Germania*, British, for Port Eads; steamship *Aldgate*, British, for New Orleans. September 10, steamship *Litorno*, German, for New York; bark *Sarmento*, American, for Turks Island. September 13, steamship *Kaffir Prince*, British, for New York.

Respectfully, yours,

W. HAVELBURG, M. D.,

Sanitary Inspector, U. S. M. H. S.

The SUPERVISING SURGEON-GENERAL,

U. S. Marine-Hospital Service.

FRANCE.

Mortality statistics for thirteen large cities.

MARSEILLES, *September 24, 1898.*

Of thirteen French cities containing above 100,000 inhabitants each, according to an official statement just published by the council-general of the department in which Marseilles is located, the vital statistics for the year 1897 were as follows:

Name of city.	Population.	Deaths.	Rate per 1,000.
Rouen.....	112,657	3,199	28.3
La Havre	118,478	3,052	25.7
Marseilles.....	447,344	11,068	24.6
Rheims	107,709	2,554	23.7
Lille.....)	215,550	4,886	22.6
Toulouse.....	149,012	3,301	22.1
Nantes	123,850	2,710	21.8
Saint-Etienne	135,784	2,831	20.8
Bordeaux	256,906	5,183	20.1
Roubaix	124,447	2,442	19.6
Nice.....	106,734	2,077	19.4
Lyons.....	466,767	8,762	18.7
Paris	2,511,629	46,802	18.6

Marseilles continues to occupy third place. During the month of May, 1897, 511 deaths were reported from typhoid fever. Of all typhoid fever cases reported, 13 per cent proved fatal. The cause of this outbreak of disease is attributed to impure drinking water provided by the city. An attempt is now being made to remedy this state of